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Bib Data Sheet

CONFIRMATION NO. 9396

SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/514,245	02/28/2000 RULE	424	1648	065691/0176

APPLICANTS

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Francois Madec, Saint-Brieuc, FRANCE;

** CONTINUING DATA *****

This application is a CIP of PCT/FR98/02634.12/04/1998

** FOREIGN APPLICATIONS *****

FRANCE 97/15396 12/05/1997

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 04/27/2000

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY FRANCE	SHEETS DRAWING 29	TOTAL CLAIMS 37	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

ADDRESS

22428

TITLE

CIRCOVIRUS SEQUENCES ASSOCIATED WITH PIGLET WEIGHT LOSS DISEASE (PWD)

FILING FEE RECEIVED 2388	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
		<input type="checkbox"/> 1.16 Fees (Filing)
		<input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
		<input type="checkbox"/> 1.18 Fees (Issue)
		<input type="checkbox"/> Other _____
		<input type="checkbox"/> Credit



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 Washington, D.C. 20231

SERIAL NUMBER 09/514,245	FILING DATE 02/28/2000 RULE	CLASS 424	GROUP ART UNIT 1643	ATTORNEY DOCKET NO. 065691/0176
APPLICANTS Andre Justin, Saint-Brieuc, FRANCE; Emanuel Albina, Tregueux, FRANCE; Pierre Le Cann, Piedran, FRANCE; Philippe Blanchard, Plerin, FRANCE; Evelyne Hutet, Saint Laurent, FRANCE; Claire Arnould, Saint-Brieuc, FRANCE; Catherine Truong, Saint-Brieuc, FRANCE; Dominique Mahe, Saint-Carreuc, FRANCE; Roland Cariolet, Ploufragan, FRANCE; Francois Madec, Saint-Brieuc, FRANCE;				
** CONTINUING DATA ***** PD				
** FOREIGN APPLICATIONS ***** PD, FRANCE 97/15396 12/05/1997				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 04/27/2000				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <u>PD</u> Acknowledged <u>PD</u> Examiner's Signature Initials		STATE OR COUNTRY FRANCE	SHEETS DRAWING 29	TOTAL CLAIMS 37
				INDEPENDENT CLAIMS 5
ADDRESS Patricia D Grandos Foley & Lardner Washington Harbour 3000 K Street N W Suite 300 Washington ,DC 20007-5109				
TITLE Circovirus sequences associated with piglet weight loss disease (PWD)				
FILING FEE RECEIVED 1632	FEES: Authority has been given in Pay No. _____ to charge/credit DEPGT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	